

Summer Sport Camps

For Boys & Girls Ages 6 to 14

The Following camps are available for 2006

Track and Field *July 5-7, 9:00am-1:00pm*

Rainier Beach HS

Soccer *July 24-26, 9:00am-1:00pm*

South Park Community Center

Volleyball *July 31-Aug. 2, 9:00am-1:00pm*

Nathan Hale HS

Girl's Softball *August 21-23 9:00am-1:1:00pm*

Lower Woodland Fields #3,4,and 6



Attend all four camps!!! Learn Basic Skills, strategies and techniques. Also, receive free giveaways and meet special guests!! Limited space so register right away. Fill out the form on the back of this flyer.

Questions? Call Brieah Marino at 206 615-0520.

OVER

CITYWIDE ATHLETICS SUMMER SPORT CAMPS Registration Form

CAMPERS NAME

CAMPERS AGE

ADDRESS

CITY/STATE

ZIP

SCHOOL

GRADE NEXT YEAR

MEDICAL INS. CO.

HEALTH PROBLEMS?/MEDICATION

PARENTS NAME

PHONE WORK/HOME

Which Camps will you attend? Please check:

- ☐ Track & Field, 7/5-7/7 Rainier Beach HS Soccer, 7/24-7/26 South Park Community Center
- ☐ Volleyball, 7/31 - 8/2 Nathan Hale HS Softball, 8/21-8/23 Lower Woodland Fields

*All camps run from 9:00am to 1:00pm Monday - Wednesday
(*Except for Track, which runs Wed-Fri 4th of July). Bring sack lunch, snacks, and water.*

Parents, sign and mail this form to:
Attn: Brieah Marino, Citywide Youth Athletics,
5201 Greenlake Way North, Seattle, WA 98103
Call Brieah with questions at 206 615-0520

Liability Waiver/Health & Insurance Form - Registration Not Valid Unless Waiver is signed

I hereby authorize the directors of the Citywide Athletics Summer Sport Camps (hereinafter referred to as "the Camp") to act for me according to their best judgment in any emergency medical situation. I hereby waive and release the City of Seattle, its staff and all Advisory Council members, and any other organizations or individuals involved with "the Camp", and "the Camp" and its staff of any responsibility or liability arising from the applicant's participation in "the Camp". I know of no medical/physical problems which might affect my child's ability to safely participate in this camp. I will be responsible for any medical or other charges incurred in connection with their attendance at camp. Costs for the treatment of injuries and hospitalization for illness/injuries incurred during "the Camp" will be the responsibility of the parent or guardian of the participant. Any insurance carried by the parents or guardian may be used to defray such medical and hospital costs.

PARENT/ GUARDIAN SIGNATURE DATE